

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type::	REGULAR
Subject Matter::	UTILITY
CD-ROM or CD-R?::	NONE
Computer Readable Form (CRF)?::	NO
Title::	SULFONAMIDE COMPOUNDS AND PHARMACEUTICAL USE THEREOF 250885US0DIV
Attorney Docket Number::	
Request for Early Publication?::	NO
Request for Non-Publication?::	NO
Total Drawing Sheets::	0
Small Entity?::	NO
Petition Included?::	NO
Licensed US Govt. Agency::	N/A
Contract or Grant Numbers::	N/A
Secrecy Order in Parent Appl.?::	NO

INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Hiroshi
Family Name::	KAYAKIRI
City of Residence::	Suita-shi
State or Province of Residence::	Osaka
Country of Residence::	Japan
Street of Mailing Address::	7-11, Aobaokaminami
City of Mailing Address::	Suita-shi
State or Province of Mailing Address::	Osaka
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	565-0802

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Yoshito
Family Name:: ABE
City of Residence:: Tsukuba-shi
State or Province of Residence:: Ibaraki
Country of Residence:: Japan
Street of Mailing Address:: 21-2-1-501, Matsushiro 4-chome
City of Mailing Address:: Tsukuba-shi
State or Province of Mailing Address:: Ibaraki
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 305-0035

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Hitoshi
Family Name:: HAMASHIMA
City of Residence:: Kyoto-shi
State or Province of Residence:: Kyoto
Country of Residence:: Japan
Street of Mailing Address:: 26-20, Katsurahitsujisaru-cho
City of Mailing Address:: Nishikyo-ku
State or Province of Mailing Address:: Kyoto
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 605-8084

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	JAPAN
Status::	FULL CAPACITY
Given Name::	Hitoshi
Family Name::	SAWADA
City of Residence::	Tsukuba-shi
State or Province of Residence::	Ibaraki
Country of Residence::	Japan
Street of Mailing Address::	25-10, Matsushiro 2-chome,
City of Mailing Address::	Tsukuba-shi
State or Province of Mailing Address::	Ibaraki
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	305-0035
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	JAPAN
Status::	FULL CAPACITY
Given Name::	Tsuyoshi
Family Name::	MIZUTANI
City of Residence::	Tsukuba-shi
State or Province of Residence::	Ibaraki
Country of Residence::	Japan
Street of Mailing Address::	25-10, Matsuchiro 2-chome,
City of Mailing Address::	Tsukuba-shi
State or Province of Mailing Address::	Ibaraki
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	305-0035

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Teruo
Family Name::	OKU
City of Residence::	Takasuki-shi
State or Province of Residence::	Osaka
Country of Residence::	Japan
Street of Mailing Address::	2-4-1-504, Tenjin-cho
City of Mailing Address::	Takasuki-shi
State or Province of Mailing Address::	Osaka
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	569-1117
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Noritsugu
Family Name::	YAMASAKI
City of Residence::	Himeji-shi
State or Province of Residence::	Hyogo
Country of Residence::	Japan
Street of Mailing Address::	1049-32, Kamae, Shikama-ku
City of Mailing Address::	Himeji-shi
State or Province of Mailing Address::	Hyogo
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	672-8071

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Osamu
Family Name:: ONOMURA
City of Residence:: Nagasaki-shi
State or Province of Residence:: Nagasaki
Country of Residence:: Japan
Street of Mailing Address:: 19-1-502, Yanagawamachi
City of Mailing Address:: Nagasaki-shi
State or Province of Mailing Address:: Nagasaki
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 852-8013

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Masahiro
Family Name:: NISHIKAWA
City of Residence:: Arai-shi
State or Province of Residence:: Niigata
Country of Residence:: Japan
Street of Mailing Address:: 5-2-6, Hakusan-cho 2-chome
City of Mailing Address:: Arai-shi
State or Province of Mailing Address:: Niigata
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 944-0047

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Takahiro
Family Name:: HIRAMURA
City of Residence:: Arai-shi
State or Province of Residence:: Niigata
Country of Residence:: Japan
Street of Mailing Address:: 687-1-207, Takayanagi,
City of Mailing Address:: Arai-shi
State or Province of Mailing Address:: Niigata
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 944-0013

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Takafumi
Family Name:: IMOTO
City of Residence:: Arai-shi
State or Province of Residence:: Niigata
Country of Residence:: Japan
Street of Mailing Address:: 30-2-5, Arai
City of Mailing Address:: Arai-shi
State or Province of Mailing Address:: Niigata
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 944-0041

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	10/047,093	01/17/02
10/047,093	Division of	09/446,110	02/14/00

09/446,110	National Stage of	PCT/JP98/02877	06/24/98
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FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
208295/1997	Japan	06/27/97	YES
114718/1998	Japan	04/24/98	YES

ASSIGNMENT INFORMATION

Assignee Name:: Fujisawa Pharmaceutical Co. Ltd.
Street of Mailing Address:: 4-7, Doshomachi 3-chome, Chuo-ku
City of Mailing Address:: Osaka-shi
State or Province of Mailing Address:: Osaka
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 541-8514